

**Introduced by Senator Florez**

February 24, 2006

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An act to amend Section 1346.1 of the Health and Safety Code, and to add Section 12958 to the Insurance Code, relating to health care.

LEGISLATIVE COUNSEL'S DIGEST

SB 1804, as introduced, Florez. Health care: product database.

Existing law, the Knox-Keene Health Care Service Plan Act of 1975, licenses and regulates health care service plans by the Department of Managed Health Care, and makes a willful violation of those provisions a crime. Existing law requires the department to maintain a database of health care service plans that operate in each of the state's counties. Existing law also regulates health insurers by the Department of Insurance and requires the Insurance Commissioner to annually publish and distribute to consumers a comparison of insurance rates report, as specified.

This bill would, on and after July 1, 2008, require the Department of Managed Health Care to include additional information in its database regarding those health care service plans. The bill would, on and after July 1, 2008, also require the Department of Insurance to maintain a database of health insurers by county that includes specified information about those health insurers. The bill would, on and after July 1, 2007, require health care service plans and health insurers to provide the respective departments with information relating to their products, and to update that information quarterly. Because a willful violation of this bill's provisions relating to health care service plans would be a crime, the bill would impose a state-mandated local program.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state.

Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: majority. Appropriation: no. Fiscal committee: yes.  
State-mandated local program: yes.

*The people of the State of California do enact as follows:*

1 SECTION 1. Section 1346.1 of the Health and Safety Code is  
2 amended to read:

3 1346.1. (a) The department shall maintain a database  
4 indicating for each county, the names of the health care service  
5 plans that operate in that particular county.

6 (b) *On and after July 1, 2008, the department shall also*  
7 *maintain in the database the following information for each*  
8 *county:*

9 (1) *The commercial and government sponsored products*  
10 *offered by each plan, including, but not limited to, a preferred*  
11 *provider organization, a health maintenance organization, and a*  
12 *point-of-service plan contract.*

13 (2) *The number of enrollees and subscribers authorized for*  
14 *each product that the plan offers, including products regulated*  
15 *by the Department of Insurance, and those offered by*  
16 *self-insured employers that are administered by a health care*  
17 *service plan.*

18 (3) *For each product, on a full-time equivalent basis, the*  
19 *number of participating physicians and surgeons by specialty,*  
20 *and the number of participating physicians and surgeons for*  
21 *each product who have indicated that they are not accepting new*  
22 *patients.*

23 (c) *The information required pursuant to this section shall be*  
24 *made available to the public on the department's Web site or in*  
25 *the department's quality of care report issued pursuant to*  
26 *Section 1368.02. The department shall update the information*  
27 *annually, shall disclose that the information is subject to change*  
28 *without notice, and shall provide a telephone number that*  
29 *consumers may use to obtain information regarding a particular*  
30 *product.*

1     (d) *On an annual basis, on and after July 1, 2007, each plan*  
2 *shall provide the data the department requests in order to comply*  
3 *with this section in a form prescribed by the department. A plan*  
4 *shall ensure that the information provided to the department is*  
5 *updated at least quarterly. If a plan delegates the responsibility*  
6 *of complying with this section to the plan's contracting provider,*  
7 *contracting provider group, or contracting specialized health*  
8 *care service plan, the plan shall reimburse the provider, group,*  
9 *or other plan for any costs incurred to comply with this section.*

10     SEC. 2. Section 12958 is added to the Insurance Code, to  
11 read:

12     12958. (a) On and after July 1, 2008, the department shall  
13 maintain a database indicating for each county, the names of the  
14 health insurers that operate in that particular county. The  
15 database shall also include the following information for each  
16 county:

17     (1) The commercial and government sponsored products  
18 offered by each health insurer, including, but not limited to, a  
19 preferred provider organization and a point-of-service plan  
20 contract.

21     (2) The number of insureds for each product that the health  
22 insurer offers, including products regulated by the Department of  
23 Managed Health Care, and those offered by self-insured  
24 employers that are administered by the insurer.

25     (3) For each product, on a full-time equivalent basis, the  
26 number of participating physicians and surgeons by specialty,  
27 and the number of participating physicians and surgeons who  
28 have indicated for each product that they are not accepting new  
29 patients.

30     (b) The information required pursuant to this section shall be  
31 made available to the public on the department's Web site. The  
32 department shall update the information annually, shall disclose  
33 that the information is subject to change without notice, and shall  
34 provide a telephone number that consumers may use to obtain  
35 information regarding a particular product.

36     (c) On and after July 1, 2007, on an annual basis, each health  
37 insurer shall provide the data the department requests in order to  
38 comply with this section in a form prescribed by the department.  
39 A health insurer shall ensure that the information provided to the  
40 department is updated at least quarterly. If a health insurer

1 delegates the responsibility of complying with this section to the  
2 health insurer's contracting provider or contracting provider  
3 group, the health insurer shall reimburse the provider or group  
4 for any costs incurred to comply with this section.

5 SEC. 3. No reimbursement is required by this act pursuant to  
6 Section 6 of Article XIII B of the California Constitution because  
7 the only costs that may be incurred by a local agency or school  
8 district will be incurred because this act creates a new crime or  
9 infraction, eliminates a crime or infraction, or changes the  
10 penalty for a crime or infraction, within the meaning of Section  
11 17556 of the Government Code, or changes the definition of a  
12 crime within the meaning of Section 6 of Article XIII B of the  
13 California Constitution.